

**UCC FINANCING STATEMENT**

**FOLLOW INSTRUCTIONS (front and back) CAREFULLY**

**A. NAME & PHONE OF CONTACT AT FILER (optional)**

Diligenz 8008585294

**B. SEND ACKNOWLEDGMENT TO: (Name and Address)**

DILIGENZ, INC.

6500 HARBOR HEIGHTS PARKWAY

SUITE 400

MONMOUTH WA 98275

**DELAWARE DEPARTMENT OF STATE  
U.C.C. FILING SECTION  
FILED 02:21 PM 02/08/2007  
INITIAL FILING # 2007 0511898**

**SRV: 070142679**

**1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names**

|   |  |             |                      |
|---|--|-------------|----------------------|
| 1a. ORGANIZATION'S NAME<br>DELAIR GROUP LLC       |  |             |                      |
| OR  | 1b. INDIVIDUAL'S LAST NAME             | FIRST NAME  | MIDDLE NAME          |
|   |  |             | SUFFIX               |
| 1c. MAILING ADDRESS<br>8600 RIVER RD              | CITY<br>DELAIR                         | STATE<br>NJ | POSTAL CODE<br>08110 |
|   |  |             | COUNTRY<br>US        |
| 1d. TYPE OF ORGANIZATION<br>LLC LIABILITY COMPANY | 1f. JURISDICTION OF ORGANIZATION<br>DE |             |                      |

**2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names**

|                          |                                  |            |             |
|--------------------------|----------------------------------|------------|-------------|
| 2a. ORGANIZATION'S NAME  |                                  |            |             |
| OR                       | 2b. INDIVIDUAL'S LAST NAME       | FIRST NAME | MIDDLE NAME |
|                          |                                  |            | SUFFIX      |
| 2c. MAILING ADDRESS      | CITY                             | STATE      | POSTAL CODE |
|                          |                                  |            | COUNTRY     |
| 2d. TYPE OF ORGANIZATION | 2f. JURISDICTION OF ORGANIZATION |            |             |

**3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)**

|  |                            |             |                      |
|--|----------------------------|-------------|----------------------|
| 3a. ORGANIZATION'S NAME<br>DE LAGE LANDEN FINANCIAL SERVICES, INC. |                            |             |                      |
| OR   | 3b. INDIVIDUAL'S LAST NAME | FIRST NAME  | MIDDLE NAME          |
|  |                            |             | SUFFIX               |
| 3c. MAILING ADDRESS<br>1111 OLD EAGLE SCHOOL ROAD                  | CITY<br>WAYNE              | STATE<br>PA | POSTAL CODE<br>19087 |
|  |                            |             | US                   |

**5. ALTERNATIVE DESIGNATION - 2006**

**6.  This FINANCING STATEMENT is to be filed (or record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum [If applicable]**

**7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (optional) [ADDITIONAL FEE]**

**All Debtors  Debtor 1  Debtor 2**

**8. OPTIONAL FILER REFERENCE DATA**

24798209MRT042252 [24400339]

**EXHIBIT**

**F**

**tabbies®**

**UCC FINANCING STATEMENT ADDENDUM - COLLATERAL**

**FOLLOW INSTRUCTIONS (front and back) CAREFULLY**

**9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT**

|  |                            |                     |
|--|----------------------------|---------------------|
| 9a. ORGANIZATION'S NAME<br><b>DELAIR GROUP LLC</b> |                            |                     |
| OR   | 9b. INDIVIDUAL'S LAST NAME | FIRST NAME          |
|  |                            | MIDDLE NAME, SUFFIX |

*This FINANCING STATEMENT covers the following collateral*

**1 NISSAN PL50LP PL02-9H3650 2 NISSAN PL50LP PL02-9H3651 3 NISSAN PL50LP  
PL02-9H3656 4 NISSAN PL50LP PL02-9H3657  
INCLUDING ALL COMPONENTS, ADDITIONS, UPGRADES, ATTACHMENTS, ACCESSIONS,  
SUBSTITUTIONS, REPLACEMENT AND  
PROCEEDS OF THE FOREGOING.**